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CONFIRMATION NO. 8152

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|-----------------------------|--|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/774,225 | FILING OR 371(c)<br>DATE<br>02/06/2004<br>RULE | CLASS<br>417 | GROUP ART UNIT<br>3746 | ATTORNEY<br>DOCKET NO.<br>EC-661 |
|-----------------------------|--|--------------|------------------------|----------------------------------|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *CCR*

This application is a CIP of 09/977,002 10/12/2001 PAT 6,688,857 which is a CIP of 09/536,332 03/24/2000 PAT 6,266,952  
 which is a CIP of 09/416,291 10/14/1999 PAT 6,499,301  
 which is a CIP of 09/396,034 09/15/1999 PAT 6,301,898  
 which is a CIP of 09/181,307 10/28/1998 ABN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *CCR*IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/06/2004

|                                 |  |                        |                      |                    |                         |
|---------------------------------|--|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR COUNTRY<br>NY | SHEETS DRAWING<br>14 | TOTAL CLAIMS<br>18 | INDEPENDENT CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance |                        |                      |                    |                         |
| Verified and Acknowledged       | Examiner's Signature <i>CCR</i> Initials   |                        |                      |                    |                         |

## ADDRESS

37282

## TITLE

Novel gas booster system

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>450 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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